## CANCELLATION, CONTINUATION, OR AMENDMENT OF CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)
To the SECRETARY OF STATE, STATE OF IDAHO
of the action(s) indicated below:
1. The assumed business name is: AA FET GROUMING THE OF TO A HO
2. The assumed business name was filed with the Secretary of State's Office
3. XX Cancellation. The persons who filed the certificate no longer claim an interest in the above assumed business name and cancel the certificate in its entirety.
4. Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date).
5. The assumed business name is amended to:
6. The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow:
Add: Delete: Name: Address:
7. The type of business is amended to read:
☐ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities ☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate ☐ Services ☐ Construction ☐ Mining
8. The name and address to which future correspondence should be addressed is changed to read:
Name and address for this acknowledgment copy is:
May Olson
2016
Secretary of State use only
- derce Falw +D \$3402 8
Benevaria Fall TJ902 Removed
Signature:
Printed Name: Traci Clacia Printed Name:

Caller

(see instruction # 4 on back of form)